

FAMILY INFORMATION FORM AND URGENT CONCERNS

This form must be completed with any petition or response in any family law or probate guardianship action.

			Case Number:	
This Family Information For confidential document. It we viewing but can be viewed by attorney, the opposing attornation is she is not represented by an	ill not be available for p by the judge, the mediate ney, or the other party if	oublic or, your		
First filing of this form	Subsequent filing of	this form		
TELL US ABOUT YOU	RSELF			
Last Name	Middle Name		First Name	Date of Birth
Other names that you have u	ised (for example, name	s from prior	marriages or alias):	
CHILDREN				
Do you have any children?	YES NO IF YES, PLEASE A	NSWER TH	E QUESTIONS BELOW	
Are you and the other paren If yes, how long have you be			months	days
Have you ever participated if yes, in which state and con				
Have you requested the serv <i>If yes, when?</i>		of Child Supp	port Services (DCSS)? Y	TES NO
Are you receiving or have ap	oplied for welfare? YES	S NO If Y	ES, when?	
			,	N, ADOPTED CHILDREN
AND THOSE WITH WI			ARDIANSHIP. Does child live with you?	Do you an order giving you full or
That Last Na	Date of Birtin		Does child live with you:	partial custody of this child?
		M F		
		M F		
		M F		
		M F		
PLEASE LIST NAMES	OF OTHER ADUL	TS LIVINO	G IN YOUR HOME.	
First Last Name		Sex	Relationship to yo	DU
		M F		
		M F		

URGENT CONCERNS Domestic Violence, Child Kidnapping, Child Sexual Abuse, Health, Schooling, Delinqu	ency	
Are you currently afraid of the other parent or anyone else living in the home for any reason? What is your concern?	YES	NO
Do you have concerns about the health, safety, or schooling of any children living in the home?	YES	NO
Has there ever been involvement by your or a member of your family with child protective services?	YES	NO
Do you have a domestic violence restraining order?	YES	NO
An interpreter may be available for domestic violence matters. Do you need an interpreter?	YES	NO
If YES, for what language?		
COURT AND POLICE ACTIONS		
Have you ever been convicted of a crime and/or put in jail or prison? YES NO		
Are there any other cases that involve this family in THIS county? YES NO If yes, please c	omplete:	
Name of Case Case Number		
	-	
Are there any other cases that involve this family in ANOTHER county? YES NO If yes, pl Name of Case Case Number	ease complete: County	
Signature Date		